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MOLLIE FANCHER . . .

‘THE BROOKLYN ENIGMA’

The Psychological Marvel of the 19th Century

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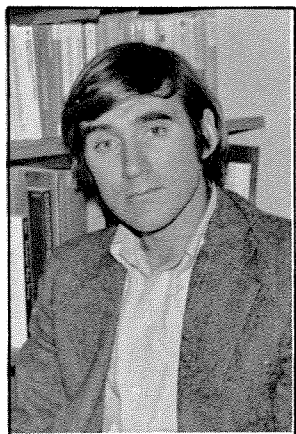
MOLLIE FANCHER—THE BROOKLYN ENIGMA'

The Psychological Marvel of the 19th Century

'The girl is simply a miracle. She says she is a miracle, and I know she is one. The entire scientific world should know all about her, and I hope the time will come when it will.'

DR. CHARLES E. WEST**

Somnambulism, dissociation, double consciousness or periodical amnesia, hysteria, neurasthenia, and the concepts of a subconscious, subliminal, hidden, or secondary self are a few of the terms (or constructs) which have all been associated at one time or another with discussions of the condition which is more popularly known as multiple (or, incorrectly, split) personality.¹ Since the earliest known case of multiple personality was recorded,² about one hundred authenticated instances of this condition have been reported in the literature and include the well-known subjects of Morton Prince, Thigpen and Cleckley, Cory and Prince, and, most recently, 'Sybil' who was psychoanalyzed by Cornelia B. Wilbur.³ Over the years, especially since the turn of the century, some of the attempts to explain the etiology of this rarely occurring condition have involved appeals to organic neurological disequilibrium, or an appeal to an initial home environment which was bizarre, restrictive, naive, or broadly hysterical.⁴ But, despite our improved insight regarding this condition today, multiple personality still remains a mysterious sport of nature; for most psychologists, psychiatrists, and physicians live long and ac-



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Dr. Walsh's teaching positions have included posts at Dickinson College, the University of New Hampshire, and Mitchell College. He was recently appointed to the Faculty of Extramural Research Advisors and Readers of Walden University, Naples, Florida.

His publications for the most part have focused on the history of topics related to medicine, psychiatry, and psychology and have appeared in such journals as *The Journal of the History of Medicine and Allied Sciences*, *Bulletin of the History of Medicine*, *Transactions and Studies of the College of Physicians of Philadelphia*, and the *Journal of the History of the Behavioral Sciences*.

Many of Dr. Walsh's publications have dealt with the history of phrenology as it relates to early psychiatry and medicine. In addition, he has edited two facsimile reproductions of early books on insanity.

More recently, Dr. Walsh's research has turned to the history of the origins of our understanding of mental dissociation in the 19th century with special reference to extraordinary cases of multiple personality and related phenomena.

tive professional careers without ever encountering a single case.⁵ During the 19th century when instances of this condition occurred they would occasionally come to the attention of reputable medical practitioners. Yet then as now this strange phenomenon was capable of evoking a 'reaction of wonder, sometimes of awe' in both professional and laymen alike, the very same reaction Thigpen and Cleckley reported to have experienced in the presence of their famous subject, Eve.⁶ One can well imagine, however, that, during the 19th century, when unusual mental phenomena were less easily explained, that mental dissociation or any altered state of consciousness during which unusual behavior was emitted evoked even greater wonder than it does today—and there appears to have been a variety of instances which kept the mystery alive. Early in the 19th century, for example, there was the bizarre somnolency of Mary Reynolds, the first reported account of a double personality.⁷ About the same time (1817) the strange behavior of Rachel Baker who at the age of seventeen began to mysteriously preach sermons in her sleep gained attention—her somniloquism being ultimately diagnosed as *somnium cum religione* was said to have been related to hysteria.⁸ In 1834 the mysterious Jane C. Rider, the so-called 'Springfield [Massachusetts] Somnambulist' became well-known in addition to attracting the personal attention of Samuel B. Woodward (1787-1850), the first president of what is now the American Psychiatric Association. Jane was treated by Dr. Woodward at Worcester for a brief period during the 1830's.⁹ Later, in 1858, *Harper's* published an anonymously-authored article describing the double personality occurring in a young woman from Georgia who was known simply as 'The Lady of Belisle.'¹⁰ The 'sleeping preacher of North Alabama' who is said to have exhibited 'most wonderful mysterious mental phenomena'¹¹ achieved renown in the 1870's and his case was followed by that of Lurancy Vennum, the Watseka, Illinois 'Wonder' who claimed to be 'possessed' by the departed spirit of a neighbor's insane daughter.¹² Mary Reynolds, Rachel Baker, the 'Springfield Somnambulist,' the 'Lady of Belisle,' the 'Sleeping Preacher,' and the 'Watsseka Wonder,' of course, had nothing over the 'Poughkeepsie Seer,' Andrew Jackson Davis, who in somnambulant trances dictated no fewer than thirty volumes of prophetic literature and whose first opus on *The Principle of Nature* ran to thirty-four editions.¹³ In the mid-nineteenth century, moreover, Rhode Island too had its own special case of 'double consciousness,' that of Ansel Bourne (b. 1826)—but that is a different story, perhaps for another occasion.¹⁴

The 19th century was indeed as Seldes called it a 'stammering' period in American cultural history.¹⁵ During that era as you may be aware, animal magnetism, somnambulant medical healing, religious revivalism, communistic societies, spiritualism, the 'mind-cure,' and phrenology were very much a part of the contemporary scene. Furthermore, it was as a result of these collective interests characteristic of the period, and as a result of the rapidly changing cultural and scientific scene, and as a result of a greater public attraction to the mysterious than has been seen in any other

period of our history and an interest on the part of the common man to sentimentalize illness¹⁶ that unusual behavioral phenomena such as double personality, out-of-body experiences, clairvoyance, somnambulism and the like attracted a great deal of popular attention. The life of Mollie Fancher to be described below, however, was never seriously studied by an American psychologist or psychiatrist as far as I have been able to determine, despite the fact that Pierre Janet held that her case contained 'many very remarkable and interesting facts,' and that upon reading of her life he was struck with 'a kind of mystic admiration' for her.¹⁷

II

Multiple personality is a condition which is classified today as a form of hysterical neurosis of the dissociative type. Disorders in this group are differentiated in part by the presence of peculiarities in the realm of memory function and include unusual states such as fugue, somnambulism, and amnesia.¹⁸ In their authoritative study of multiple personality published in 1944, Taylor and Martin were able to describe seventy-six cases of true multiple personality which had appeared as of that date. Other instances have occurred since then. For them 'a case of multiple personality . . . [was taken] to consist of two or more personalities each of which . . . [was] so well developed and integrated as to have a relatively coordinated, rich, unified, and stable life of its own.'¹⁹ They excluded from their definition ' . . . cases which seem too simply hypnotic, narrowly hysterical, evidently organic or psychotic, likely faked, or insufficiently described to be called multiple personality.'²⁰ Mollie Fancher was included in their listing as she was in Morton Prince's listing thirty-eight years earlier; as will soon be shown, however, her case was more bizarre than either Taylor or Martin and perhaps even Prince imagined.²¹ It is a pleasure to introduce Mollie to you—Mollie who came to be known as the 'Brooklyn Enigma' or 'The Psychological Marvel of the Nineteenth Century.'²²

Mary J. Fancher, known affectionately as Mollie, was born in Attleboro, Massachusetts on the 16th of August, 1848, and was the eldest child in a family of five children, only 3 of whom—including Mollie—appear to have survived to adulthood.²³ Her parents, James E. and Elizabeth (Crosby) Fancher, moved to Brooklyn, New York, when Mollie was about two, and shortly thereafter she was enrolled in a private school.

Several years later (1855) Mrs. Fancher died. Mollie's father remarried and left the Fancher home soon after this event, following which the deceased Mrs. Fancher's sister, Miss Susan E. Crosby, moved into the house in Brooklyn and assumed the role of surrogate mother.²⁴ Mollie, who had been her mother's favorite child,²⁵ must have viewed these events—the death of her mother, the remarriage and subsequent apparent abandonment by her father (plus the earlier loss of two younger siblings)—as disruptive indeed.²⁶ For, despite the fact that events like these could disturb any normal child Mollie had been described as being a 'child of sorrow' and in need of special care even before her mother died.²⁷ Yet, Mollie was still said to have been generally healthy up to age fifteen,²⁸ and it was not until later in her life that she came to be referred to by her chief biographer as 'the most remarkable case in medical history.'²⁹

In the spring of 1864 Mollie was completing her studies at the Brooklyn Heights Seminary and was anticipating graduation. She was described then as being tall, graceful, and slender, 'what would be termed spirituelle, with light hair and complexion, a fragile figure, pale countenance, large sparkling eye[s], with a forehead and features indicative of thought rather than execution,' and 'a universal favorite among her schoolmates, teachers, and friends.'³⁰ However, it is at this point in her life that we get the first glimpse of her developing 'delicate condition.' During this year, for example, her health began to fail and 'her trouble was pronounced [dyspepsia or] nervous indigestion.'³¹ She then developed anorexia, began to waste away, complained of weakness in the chest, was subject to frequent fainting spells, and finally had to leave school two months before graduation.³² Mollie was at this point, it appears, that is, a not atypical genteel Victorian young lady 'going into decline' and epitomizing the ideal of feminine frailty. For it was during this era, as one can gather from



MOLLIE FANCHER

as she appeared at the end of her nine year "long trance," in 1875.

the contemporary literature, that 'delicate conditions' experienced something of a vogue insofar as robust healthfulness in young ladies was viewed, it seems, as being somewhat unfeminine. These early signs of Mollie's impending full-blown neurosis, however, depict the nature of her very special temperamental condition quite well. But the main precipitating events which appear to have eventuated in the enigmatic life of Mollie Fancher were two accidents, one major and one minor, the first one of which—the minor accident—occurred in May 1864,³³ about three months before Mollie's 16th birthday.

Subsequent to leaving the Seminary, Mollie's physician prescribed horseback riding for her as the best means of exercise to cure her dyspepsia, and, with this prescription, we have the first indication that hysteria may have been suspected. For, since the 16th century when Ambroise Paré prescribed improved marital relations as a cure for amenorrhea and hysteria in married women, and walking, dancing and horseback riding for maidens with the same complaints, horseback riding as a therapeutic measure for hysteria had remained a favorite remedy for centuries.³⁴ This prescription for Mollie, however, led to other problems, for during a therapeutic jaunt on May 19th she was suddenly and violently thrown from her horse. In this accident she struck her head on a curbstone, broke several ribs, was rendered unconscious, bled profusely, 'and with her foot caught in the stirrup . . . remained motionless where she had fallen.'³⁵

For the next year Mollie suffered a variety of symptoms all of which were attributed to her accident. She was seriously ill from July to September 1864, suffering from headache and pains in her side. Her eyesight became 'defective' and she complained of double vision. But she seemed to 'rally, and was quite smart during the fall and winter, and up to June, 1865'³⁶ and it was generally held at the time that she 'would have [totally] recovered from the effects of this fall had not a second misfortune followed . . .'³⁷ In fact, so optimistic was Mollie at this time she agreed to an offer of matrimony in the spring of 1865 and began to make plans for her wedding.³⁸ But this potentially momentous step was perhaps too much for her sixteen year old delicate constitution to bear and this in turn may have made her more vulnerable to the events which followed.³⁹ On 8 June 1865, Mollie had done some last minute shopping before leaving for Boston, where her nuptial plans were to be completed, and was returning home by street-car. Upon beginning to alight from the car when she arrived home, the conductor prematurely signaled the coachman to continue forward. Mollie, who had not yet safely alighted, was immediately thrown to the ground and her dress, made of a strong crinoline, caught on a hook at the rear of the car and dragged her on the cobblestones for nearly a city block before she was noticed. According to her biographer, 'She was taken up unconscious; her ribs were broken [again, and] her body had been turning round and round, twisting her crinoline into a rope as she was dragged through the street.'⁴⁰ Conveniently, as it seems, the marriage plans were canceled and Mollie was put to bed, only to stay there for the remaining fifty-one years of her life.

III

Poor Mollie Fancher, a 'child of sorrow' in need of special care, a child who suffered severe headaches all her life,⁴¹ a child who was thought to have had consumption at



MOLLIE FANCHER WHEN SIXTEEN YEARS OF AGE.

the very moment when she was about to bloom into full womanhood,⁴² a child who epitomized the Victorian ideal of spirituality and feminine frailty . . . ; poor Mollie Fancher had to suffer above all that the indignities of two accidents the latter of which plucked her swiftly from the potential embraces of a nuptial bed.

Until the middle of August of 1865 Mollie remained completely bedridden, but soon she tried to get up a little, only to discover that she could not place her feet flat on the floor, that she fainted often, and that her left arm was paralyzed. Symptoms which seemed to suggest spinal disease followed in addition to new diffuse discomfort, malaise, insomnia, and failing eyesight. The epileptiform spasms which she had first experienced shortly after the second accident continued also, but her condition remained about the same until the middle of February, 1866. It was at that point, on or about 15 February that she experienced her first trance which, when coupled with spasms, remained a feature of her condition for the remainder of her life. Additionally, over the next few months her condition was so complex and changing that it was suspected that her entire nervous system was deranged. For example, a reviewer writing in 1929 dramatically summarized some of the events which immediately followed her first trance as follows:

On the 17th [of February] she lost vision, on the 19th hearing, on the 22nd she again saw, heard and spoke for half an hour, the next day her sense of smell vanished, on the 24th the hands closed, on the next the jaws locked, on the 26th the limbs contracted. But on March 9th the muscles relaxed and she saw, heard and spoke for several hours. Fainting spells then replaced the spasms for four days, and then came a period of daily spasms of about twenty minutes followed by trances of from three to five hours. To April 28th her condition was about the same, most days with spasms and trances, speech sometimes returning briefly . . . On the 28th her jaws relaxed and some nourishment

was "forced into her stomach," with spasms of from three to four hours following. On May 20th she was hungry, and ate a small piece of cracker and drank a spoonful of punch, the first food, says Miss Crosby, retained for seven weeks. On the 27th a clap of thunder again deprived her of the power to speak. Spasms and trances, "absent-mindedness," pains . . . [and so on] for the next month, etc.⁴³

The record of these phenomenal events continues much in the same manner beyond this period and into the remainder of the year during which time Mollie was watched by a team of fourteen attendants, at least seven of whom were needed to hold her on the bed during an attack.⁴⁴

To this point Mollie's condition was a classic case of traumatic hysterical neurosis which also included a few broken ribs (since healed), a minor head injury, and consumptive complaints as contributing, precipitating, or exacerbating traumata (although nervous system damage was suspected, it was never demonstrated). Mollie's spasms, tetanoid contractures, opisthotonos, and dislocations, moreover, are some of the symptoms which the French psychiatrist Jean Charcot (1825-1893) referred to in his discussion of hysteria major and/or epileptiform hysteria (hystero-epilepsy) wherein there is exhibited seizures with the tonic and clonic convulsions and some of the bizarre postures of true epilepsy, although the condition is purely psychogenic. The paroxysms which Mollie exhibited, for that matter, were all described by Charcot. In addition, Mollie exhibited all the 'physical stigmata' of hysteria including (1) the sensory disturbances, the anesthetics and hyperesthesias; (2) the disturbances of the special senses, including, for example, deafness and narrowing of the field of vision, and (3) the motor disturbances.⁴⁵ Over and above these symptoms, however, Mollie was anorexic, experienced partial (but almost total) psychogenic paralysis, insomnia, vomiting, generalized pains, photophobia, various crises and some of the other stigmata associated with this condition, some of which are described by Morton Prince.⁴⁶ Her retrospective dialogue, moreover, wherein she is quoted by Dailey (n.22) commenting on her own case is remarkable for its clinical objectivity and illustrates quite well the conversion hysterical phenomenon which Janet called *la belle indifference*, i.e., an attitude of calm which contrasts strangely with the extent of the physical disability.⁴⁷ But a diagnosis of traumatic hysterical neurosis, conversion type, in this instance would not do justice to the richness of Mollie's neurosis, complicated as it is by the fact that there *may* have been some minor neurological impairment from her accidents (although it is questionable that there was); for, despite the fact that she soon developed mental dissociation, she retained even thereafter many of the features of hysterical conversion on top of a disintegrated self.⁴⁸ Additionally, fantastic claims (some authenticated) were made about her, including, for example, that she existed on inordinately small amounts of food,⁴⁹ that she could and did go for periods up to three months while entranced failing to exercise any natural functions of nature,⁵⁰ that she was clairvoyant, clairaudient, existed by ethereal 'spiritual support,' and that she possessed extrasensory skills beyond belief.⁵¹ But it is not possible to go into the details of these phenomena on this occasion, for I would like to now turn to the other features of Mollie's case which are nonetheless remarkable.

February 3, 1866 is the date which both Mollie and her biographer established as the point in time when her permanently bedridden life began and she was but seventeen years old at that time. I mentioned earlier that Mollie experienced her first trance on or around 15 February 1866⁵² and that her condition alternating with spasms and trances remained a feature of her life thereafter; but, sometime in the summer or early fall of that year a variation on this occurred in the form of Mollie's long trance, so-called, a trance, that is, which lasted for nine years.

On 28 June 1866 Mollie's right arm was suddenly drawn up over her head, her legs contracted and she was rendered unconscious. On 12 July she was traumatized by a fire alarm and entranced for three days. On the 18th of July a thunderstorm precipitated opisthotonic contractures and spasms and in August and September she suffered greatly when she received chloroform for the removal of all her teeth. In September her hip joints were spontaneously dislocated by violent contractures placing her lower limbs in what was called a 'three-twist,'⁵³ her eyes closed permanently, her fingers were rendered in a fixed position and thus she remained for the next nine years, in addition to being cataleptic and periodically convulsive.⁵⁴

It was during Mollie's nine year period from 1866-1875 that she exhibited many of the feats which made her famous. For despite the fact that she remained almost completely immobilized she still managed to use her hands by bringing her left hand up to meet her right, which was rigid behind her head. She is said to have written no less than 6,500 letters during this period, to have prepared one hundred thousand ounces of worsted, a great deal of fine embroidery, many beautiful and accurately-executed wax objects, particularly flowers, and kept a diary.⁵⁵ But, as I mentioned earlier, her most controversial feats⁵⁶ involved a variety of alleged extrasensory phenomena.⁵⁷

Sometime in 1875 it was reported that Mollie entered a short unconscious and completely motionless state for about one month following which she emerged with total amnesia for the preceding nine years. Her right arm gradually relaxed and became usable, her legs untwisted, her eyelids opened, her hands opened, she was able to eat a bit more normally, and coming to consciousness she looked around her room only to become dismayed that all had changed from what she remembered it to have been in 1866. She is said to have resumed her conversation where it left off nine years earlier and gave the following subjective impressions of what she was experiencing:

Strange thoughts came into my mind, and strange sensations came over me. When I looked upon the wax flowers, the work of my hands, I could not realize that they had been done by me. They were repugnant to me. The sensation that I experienced was that they were the work of one who was dead.⁵⁸

And indeed, the creative work, the physical state, memories and the general activities of the Mollie Fancher of 1866-1875 were viewed from 1875 onward as if they had belonged to '[some]one who was dead.' For, gradually over a two-week period sometime during this year a new Mollie Fancher emerged, a Mollie who recalled the accidents of 1864-1866, but who recalled nothing of the nine year 'long trance' period.⁵⁹ Thus, the Mollie Fancher of the preceding nine years may be viewed as having been a secondary self, isolated from the new Mollie then and subsequently isolated



Miss Susan Crosby (left) and Mollie. Photograph taken in 1886.

from her four other secondary selves which were to emerge later. The Mollie of the period 1866-1875 may be named the 'isolated X-personality' for convenience, since Dailey does not differentiate this self from the remaining ones which came later.⁶⁰

The Mollie Fancher who emerged in 1875 as the 'primary (normal) personality' was given the name 'Sunbeam.'⁶¹ Dailey described her as '... the Mollie Fancher usually seen during the day, who manages and gives directions about her affairs...,'⁶² i.e., 'the one we ordinarily recognize when we visit.'⁶³ As was intimated above, to reiterate, Sunbeam was totally amnesic for the preceding nine years and 'knew no one who had first been met during that period,' but did recall the accident years. Upon Sunbeam's appearance, she took upon herself the task of relearning the craft skills which the 'isolated X-personality' had mastered during the previous nine years and was said to have soon created 'more beautiful work.'⁶⁴ But Mollie's—or, rather, Sunbeam's—condition soon changed. Sometime during 1875 and then in 1876 following 'nervous shocks' four distinct alternating personalities emerged, and they too remained a feature of her case for the remainder of her life.⁶⁵ These four personalities only emerged late at night when Mollie would retire around 11 p.m. (Sunbeam remained in control throughout the day). In all cases the transition first from the primary normal state to the first secondary self and then to the other selves followed the same pattern. First there would be a rigid trance (myotonus). As that subsided Sunbeam (or Mollie) would enter a 'relaxed trance,' so-called, during which 'there would be violent shaking of the body, swinging of the arms, beating of the breast and top of the head, ... cessation, and awakening of another consciousness.'⁶⁶ In the aggregate the entire event resembled a grand mal attack.⁶⁷ For the purpose of distinguishing the different personalities or selves of Mollie Fancher they were named in order of their usual appearance, 'Idol,' 'Rosebud,' 'Pearl,' and 'Ruby,'⁶⁸ and they will be briefly described below.

As was mentioned earlier, when Sunbeam, or the 'normal' Mollie, retired around 11 p.m., her spasms and trances would begin and would be followed by the appearance of Idol. Idol was described as being exceedingly jealous of the daytime Mollie, or Sunbeam, and took to unraveling Sunbeam's embroidery or hiding it so she couldn't find it, and the two wrote letters to each other in two distinct handwriting styles. Idol's orientation in time extended from early childhood up to about the time of the first accident, although not including it.⁶⁹ Each time she returned she is said to have taken up her life exactly where she had left off. Rosebud was described as presenting 'the sweetest little

child's face,' and spoke in the tone of a child of about six or seven. Rosebud had first appeared about 1875, but only intermittently and for a short duration and she disappeared for a time only to reappear in 1886. She is said to have stated when questioned that she was seven years old; and, according to one observer, she behaved just as a seven year old child. Additionally, her memory was limited to her childhood and to the events of her life which occurred when she was present. Pearl was described as the epitome of spiritual beings on this earth. She was said to be like a young lady of seventeen or eighteen years, very sweet in expression. Her orientation in time encompassed all the events which transpired up to about her sixteenth year, and she was said to pronounce her words with an accent peculiar to young ladies of about 1865. She also had no recollection of the accidents of the 1864-1866 period. Finally, Ruby was described as being quite the opposite of Pearl. She is said to have possessed a good humor, to have been full of vivacity, and to have been bright, witty, and quite smart, doing everything with a dash. She did not, however, concern herself much with the life of the daytime Mollie Fancher although she did recall the accident of 1864, but not the second one. Although it was suspected that she knew more than she told, she appears to have been an entirely new personality, perhaps the one Mollie would have liked to have been.

IV

During the last quarter of the 19th century, Mollie's illness and alleged extrasensory powers became increasingly controversial. In 1878, for example, one of the eminent founders of the American Neurological Association, Dr. William A. Hammond (n.57), was interviewed by a newspaper reporter in New York, the result of which was a published attack on Mollie and on the alleged gullibility of her supporters. Mollie 'was publicly accused of deception' and adjudged a 'simulative hysteric.'⁷⁰ Miss Fancher was not to blame, he added, since 'hysteria prompts deception' and Mollie should be 'aided in every way to overcome the desire to deceive.'⁷¹

Dr. Hammond was not alone in attacking Mollie and her observers, however, for he was joined in 1878 on the offensive by Dr. George M. Beard, a physician and author of some renown who had written a number of articles on the perceived delusion of modern spiritualism as it related to medicine and human testimony.⁷² In an article in *The Medical Record* of New York entitled 'The scientific lessons of the Mollie Fancher case' Beard launched his own personal attack.⁷³ He held that

From a scientific point of view, this [Fancher] case has a threefold interest, and is worthy of far more attention from neurologists than it has yet received, (1) as illustrating the phenomena of trance and the automatic side of the nervous system; (2) as illustrating the worthlessness of average human testimony in matters of science ... [; and,] (3) as enforcing the necessity of the reconstruction of the principles of evidence on the basis of the physiology of the brain.⁷⁴

Furthermore, Beard did not view Mollie's condition as exceptional or unprecedented, and although he felt that there were none more 'honorable' nor 'able' than the physicians of Brooklyn who attended Mollie, '... the instincts of the majority, both of general practitioners and specialists of nervous diseases, reject all of their testimony relating to claims of clairvoyance, mind reading and prophecy.'⁷⁵

Beard's diagnosis of Mollie's condition was that 'in ordinary neurological language this . . . would be designated as hysteria of a traumatic origin, with contractures and attacks of ecstasy, which like catalepsy, is but another term for one of the many phases of trance.'⁷⁶ He concluded that this 'case will have been of value, if it shall do no more than impress on the [medical] professional mind the importance of a re-study and rebuilding of the logic of medicine.'⁷⁷

But despite the authority behind the pronouncements of Beard and Hammond on Mollie's alleged extrasensory powers (neither one of them discusses Mollie's multiple personality), the press persisted in its coverage of her case. Additionally, there were well-known and reputable individuals who defended Mollie in most cases based on their own *personal experience with her*, one of whom, the then prominent writer Epes Sargent (1813-1880, n.73), published a lengthy rebuttal to Hammond's and Beard's attack.⁷⁸ Dr. Charles E. West, a leading 19th-century educator and the principal of the Brooklyn Heights Seminary where Mollie had attended school was convinced that Mollie had extrasensory powers and that her case was a 'rich mine for investigation' for the physiologist and psychologist.⁷⁹ Additionally, the noted astronomer Henry M. Parkhurst (b. 1825) performed several tests of Mollie's extrasensory ability and became convinced of their authenticity. He concluded two years after one test, for example, that 'no one . . . [was yet able to suggest] any point [to him] in which it . . . [failed] to be an *experimentum crucis*' (i.e., no one

Some time in 1891 or 1892 Judge Dailey received a request from Dr. Elliott Coues (1842-1899), the noted American ornithologist and former surgeon of the United States Army, to make a careful study of the Fancher case and make a report of it before the 'Psychical Congress' to be held at the 'Columbian Exposition World's Fair Auxiliary' in Chicago in August, 1892.⁸² The report was made before a 'large and attentive' audience, Dailey tells us, as a result of which 'it occasioned much comment at the time, through the public press of this country, and also in foreign journals.'⁸³ In addition, Dailey's report brought out in the open the incredulous who wished to examine for themselves this *lusus naturae* in Brooklyn and he was asked to allow a team of scientists to examine her. The *Medico-Legal Journal* of New York published an article to this effect in June, 1894, entitled 'The Case of Mollie Fancher' and 'the section on Psychology of the Medico-Legal Society . . . [there] appointed a committee . . . of eminent medical gentlemen to examine . . . ' Mollie for themselves.⁸⁴ In Dailey's judgment such an investigation was not appropriate or necessary and in the same number of the *Medico-Legal Journal* he gave detailed reasons to support his position. Subsequent to that, the editor of the *Medico-Legal Journal*, 'Clark Bell, Esq. of New York City,' published a rejoinder in which he noted that with no opportunity forthcoming for a team of physicians to examine Mollie 'additional doubt' would be cast upon her case and would only 'add to the reserve [then present] with which the medical pro-

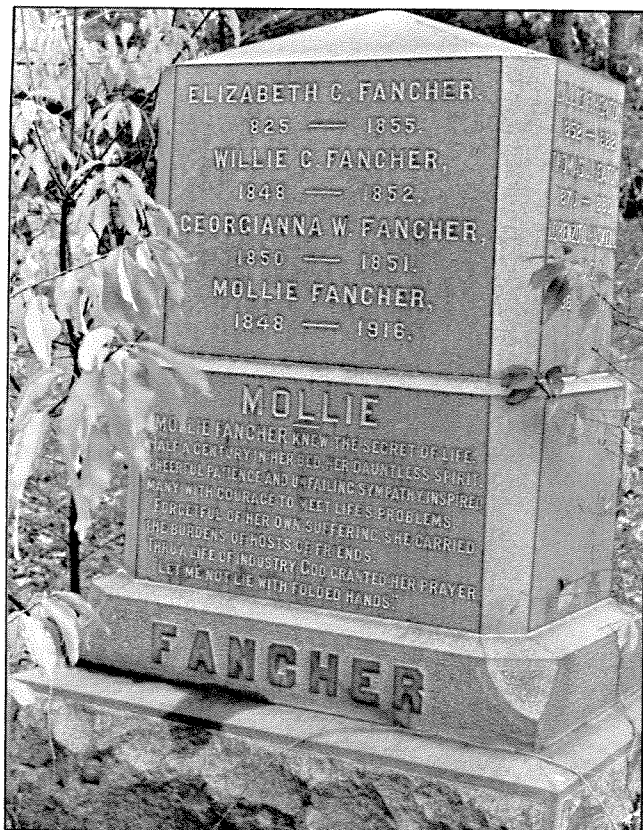
Yet it is remarkable and unfortunate indeed that due to a very widespread disdain among scientists of the late 19th century toward anything that smacked of spiritualism, extrasensory phenomena, or the occult, Mollie's case failed to receive the judicious attention it merited.

had yet been able to demonstrate to him that his results were questionable).⁸⁰

We have then the situation where at least two very prominent physicians denounced Mollie Fancher's extrasensory prowess publicly on the grounds that she was basically an hysteric yet neither physician actually saw her personally nor did they indicate an interest in her as a multiple personality. On the other side there was much more testimony than is cited above in support of her extrasensory powers much of which comes from sources which should be viewed as having been equally authoritative if not potentially more so—since in those cases there was personal contact with the subject. Abram Dailey, moreover, the author of Mollie's biography, was a prominent New York judge who was also one time president of the Medico-Legal Society there. He, of course, was convinced that her case was authentic in every detail.⁸¹ Based on my understanding of the case, however, I remain convinced that Mollie's traumatic hysteria was a genuine one as was her multiple personality. Yet it is remarkable and unfortunate indeed that due to a very widespread disdain among scientists of the late 19th century toward anything that smacked of spiritualism, extrasensory phenomena, or the occult, Mollie's case failed to receive the judicious attention it merited. But there were other, and, in retrospect, unfortunate reasons for Mollie's case's not receiving the attention it deserved and these appear to have been due in part on one occasion to Abram Dailey himself.

profession' received its details. Nevertheless, Bell still refers to Mollie as being 'in every way remarkable.'⁸⁵ But, Dailey persevered arguing that the testimony of 'scientific men' and others in her behalf was already recorded and for Mollie to 'give herself up to the incessant inquisition of [more] investigators . . . [was] unreasonable in the extreme.'⁸⁶ Yet in fairness to Dailey it should be pointed out that he was at that time only acting to protect Mollie from massive scrutiny by a curious and disbelieving public and scientific community. By 1894, it should be realized, she had already been an object of study for thirty years and according to reports continually shrank from making a public exhibition of herself; this included turning down an offer from P.T. Barnum (1810-1891) himself.⁸⁷

Additionally, as Dailey pointed out, some time prior to 1873, with the consent of Mollie and her friends, Dr. Charles West began to make arrangements for a scientific board of examination to investigate the case which he had hoped would eventually include the Irish physicist John Tyndall (1820-1893) and the biologist Thomas Henry Huxley (1825-1895). At that early period West had been in communication with Dr. Jeffries Wyman (1814-1874) of Harvard, a 'naturalist' and 'one of the most distinguished comparative anatomists of the United States.'⁸⁸ Arrangements were made for Wyman to come to New York with none other than the equally well-known naturalist Louis J.R. Agassiz (1807-1873). As they were about to leave for New York, Mollie took a turn for the worse and their visit, which was



Mollie's gravestone in Brooklyn, NY photograph/Joseph Brennan

to last several weeks, was postponed. 'But in a few weeks . . . professor [Wyman] died,' West wrote, 'and Agassiz also soon was gone . . . [Mollie] outlived both.'⁸⁹

On 2 November 1907, Abram Hoagland Dailey died; and it appears that no team of critical and possibly incredulous examiners ever were allowed to examine Mollie during his lifetime or during the almost nine years that Mollie lived beyond him, even though Dailey felt that they would have been welcomed and would have been received by Miss Fancher as 'private individuals.'⁹⁰ Thus, no definitive report on her most unusual case has yet been prepared. For the nonce, therefore, Mollie may retain her title 'The Brooklyn Enigma,' and retain for the moment additionally some of the mystery which led to her being called 'The Psychological Marvel of the Nineteenth Century.'⁹¹

Epilogue

Mollie Fancher was a marvel indeed, for three-quarters exactly of her sixty-eight year life span was spent in bed as an object of study as delicate and sensitive to the elements as were the wax flowers she so painstakingly fashioned with her deformed hands. She never seems to have received any treatment which helped her or appreciably altered her condition and perhaps even if she had, she may not have responded favorably. She continued to experience trances and epileptiform attacks to the end of her life and appears to also have retained her alternating multiple selves. In 1915, at the age of sixty-seven, she began elaborate plans to celebrate her 'Golden Jubilee' of fifty years in bed, to be held on 3 February 1916.⁹² She underwent two operations that same year (1915) with great difficulty and barely survived them.⁹³ But her 'Golden Jubilee' was ultimately celebrated on schedule, even though President Woodrow Wilson had to decline his personal invitation to attend. Eight days later, on 11 February 1916, 'heart

disease' took Sunbeam, Idol, Rosebud, Ruby, Pearl, the very mysterious and isolated 'Madame X,' and the 'real' Mollie Fancher (whoever she may have been) to their grave. On 15 February 1916, after a funeral where about one-hundred-fifty persons paid their respects to 'the [departed] cheerful invalid,' they were buried in the Greenwood Cemetery, 5th Avenue at 25th Street, Brooklyn, New York.⁹⁴

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** Dr. Charles Edwin West was the Principal and Proprietor of the Brooklyn Heights Seminary where Mollie had been a student. This quote is taken from Dailey, n.22, p.211.

1. In very early literature instances of phenomena related to multiple personality were oftentimes discussed under the heading of somnambulism. See L.W. Belden's *An account of Jane C. Rider, the Springfield somnambulist* (Springfield [Mass.], 1834) for a brief discussion of the most prominent early cases. The earliest published case on record is S.L. Mitchell's 'A double consciousness, or a duality of person in the same individual,' *New York med. repository*, 1817 [1816?], 3, 185-186. This case was referred to as the 'Lady of Macnish' by Pierre Janet (1859-1947) in *The major symptoms of hysteria*, 2nd ed. (New York, 1920), pp.68-69 since he had first read of it in Robert Macnish, *The philosophy of sleep* (Hartford, 1843 [one of several editions]), pp.31-32. The basic concept of 'dissociation' began with Charcot in 1872, according to West (L.J. West, 'Dissociative reaction,' in A.M. Freedman, H.I. Kaplan, and H.S. Kaplan, eds., *Comprehensive textbook of psychiatry* [Baltimore, 1967], p.885), was extended by Janet in 1889 and extended further by Morton Prince in 1905. See also Morton Prince, 'Hysteria from the point of view of dissociated personality,' *J. abnorm. soc. psychol.*, 1906, 1, 170-187; M. Prince, *The dissociation of a personality* (New York, 1905); and O. Marx, 'Morton Prince and the dissociation of a personality,' *J. hist. behav. sci.*, 1970, 6, 120-130. On double consciousness or periodical amnesia in connection with multiple personality, see C.L. Dana in A.H. Buck, ed., *A reference handbook of the medical sciences* (etc.), Vol. 2 (New York, 1886), pp.277-279 cited in W.S. Taylor and M.F. Martin, 'Multiple personality,' *J. abnorm. soc. psychol.*, 1944, 39, 281-300 (pp.282 and 298); C.L. Dana, 'The study of a case of amnesia or "double consciousness,"' *Psychol. rev.*, 1894, 1, 570-580; and Mitchell (1817) mentioned above. Multiple personality has long been associated with hysteria and in the DSM-II of the American Psychiatric Association (Washington, 1968) the term has come back into favor (q.v. Veith, n.33 and Myers, n.17). Also see J.E. Donley, 'On neurasthenia as a disintegration of personality,' *J. abnorm. soc. psychol.*, 1906, 1, 55-68; and, on the turn-of-the-century debates over the nature of the subconscious mind or sub-stratum of human personality see J. Jastrow, *The subconscious* (Boston, 1906) and *Subconscious phenomena* (Boston, 1910).

2. The case of Mary Reynolds, Mitchell, Janet, and Macnish, n.1.

3. Prince, n.1 (1906), and M. Prince, 'Miss Beauchamp: the theory of the psychogenesis of multiple personality,' *J. abnorm. soc. psychol.*, 1920, 15, 67-135; C.H. Thigpen and H. Cleckley, 'A case of multiple personality,' *J. abnorm. soc. psychol.*, 1954, 49, 135-151 (reprinted in I.G. Sarason, *Contemporary research in personality* [New York, 1962], pp.367-383); C.H. Thigpen and H. Cleckley, *The three faces of Eve* (New York, 1957 [reprinted, 1974(?)]); and E. Lancaster and G. Poling, *The final face of Eve* (New York, 1958), the latter recently reissued as *Strangers in my body* (New York, 1974); C.E. Cory, 'Patience Worth,' *Psychol. rev.*, 1919, 26, 397-407, and W.F. Prince, *The case Patience Worth: A critical study of certain unusual phenomena* (Boston, 1927); F.R. Schreiber, *Sybil* (New York, 1974); q.v. R.J. Stoller, *Splitting: A case of female masculinity* (New York, 1973).

4. For examples, see B. Sidis and S.P. Goodhart, *Multiple personality: An experimental investigation into the nature of human individuality* (New York, 1905); P. Horton and D. Miller, 'The etiology of multiple personality,' *Comprehensive psychiat.*, 1972, 13, 151-159; and Schreiber, *Ibid*.

5. Cornelia Wilbur believes 'that this illness occurs more frequently than is [generally] recognized by physicians, [and that] not impossibly many persons who suffer from amnesia are in reality multiple personalities,' see Schreiber, n.3, p. 449. It is, nevertheless, one of the most infrequent and obscure psychiatric entities. Also see R.W. White, *The abnormal personality* (New York, 1948), pp.299-311 (302).

6. Thigpen and Cleckley, n.3 (in Sarason), p.368.

7. See n.1 and James, n.12.

8. M.M. Simpson and E.T. Carlson, 'The strange sleep of

Rachel Baker, *The Academy Bookman*, 1968, 21 [1]-13.

9. See n.1.

10. Anon., 'The lady of Belisle,' *Harper's New Monthly Mag.*, 1858, 16, 624-635. This is a delightful Victorian love epic and it reads much like a Poe mystery story.

11. G.W. Mitchell, *X + Y = Z, or the sleeping preacher of North Alabama, containing an account of most wonderful mysterious mental phenomena, fully authenticated by living witnesses* (n.p. [printed for the author], 1876).

12. E.W. Stevens, *The Watseka Wonder* (Chicago, 1887), discussed in W. James, *The principles of psychology* (New York, 1950 [1890]), 1, 396-398. Curiously, James refers to Lurancy's situation as an 'extreme case of "possession" . . .', p.396.

13. See A.J. Davis, *The principles of nature, her divine revelations, and a voice to mankind, by and through Andrew Jackson Davis, the 'Poughkeepsie Seer' and 'Clairvoyant'*, 5th ed. (New York, 1850 [1st ed., 1847]). Also see G. Seldes, *The stammering century* (New York, 1928), pp.321 and *passim*, and A.A. Walsh, 'A note on the origin of modern spiritualism,' *J. hist. med. all. sci.*, 1973, 28, 167-171.

14. Anon. and A. Bourne. *Wonderful works of God, A Narrative of the wonderful facts in the case of Ansel Bourne of Westerly, Rhode Island* (Irvington, N.J., 1858), and *Proc. soc. for psychical res.*, vol. vii, (London, 1891-92), and James, n.12.

15. Seldes, n.13.

16. R.H. Shyrock, *Medicine and society in America: 1660-1860* (Ithaca, New York, 1960), p.120.

17. Janet, n.1, pp.84-85. Frederick W.H. Meyers in *Human Personality and its survival of bodily death*, 2 vols. (London, 1903), 1, 64 and 352-354 discusses Mollie's case in conjunction with his chapter on 'Disintegrations of Personality,' pp.34-69. William James does not discuss her even though he was a contemporary (his *Principles* were published in 1890 [n.12], however, while the book on Mollie's life did not appear until four years later). Taylor and Martin list Mollie's case in their comprehensive report (n.1) but do not discuss her.

18. The DSM-II (1968, n.1) described dissociative reactions somewhat different from the DSM-I (1952). In the DSM-I, depersonalization, stupor, dream state, and dissociated personality appear under the description of 'dissociative reactions' (000-x02, p.32). These terms do not appear in the description of this condition in the DSM-II where it states simply that 'In the dissociate type [of hysterical neurosis], alterations may occur in the patient's state of consciousness or in his identity, to produce such symptoms as amnesia, somnambulism, fugue and multiple personality,' p.40 (see n.1). Recently the concept of an hysterical psychosis has received some attention. On this topic see M.H. Hollander and S.J. Hersch, 'Hysterical psychosis,' *Amer. j. psychiat.*, 1964, 120, 1066-1074.

19. Taylor and Martin, N.1, p.282.

20. *Ibid.*

21. *Ibid.*, p.286, n.18 and Prince, n.1, 'Hysteria' (1906).

22. Biographical information on Mollie's life is contained mainly in the biography of her prepared by Abram H. Dailey and published in 1894, viz., *Mollie Fancher, the Brooklyn enigma: An authentic statement of facts in the life of Mary J. Fancher, the psychological marvel of the nineteenth century* (Brooklyn, N.Y.).

23. In addition to the Dailey biography (n.22) biographical information on Mollie's life is contained in *Two old cases reviewed* (C.B. Sanders and Mollie Fancher), *Boston soc. psychical res.*, Bulletin xi, December, 1929.

24. This early disruptive environment should be borne in mind since both Wilbur via Schreiber, n.3, and Horton and Miller, n.4 discuss the importance of the premorbid early environment in cases of multiple personality.

25. Dailey, n.22, p.6.

26. The circumstances surrounding some of these events are not made clear in Dailey's (n.22) biography. According to the monument at the Fancher burial site in Brooklyn, N.Y., one Willie C. Fancher lived from 1848-1852 (remember that Mollie was born in 1848 as well) and a Georgianna W. Fancher lived from 1850-1851.

27. Dailey, n.22, p.7.

28. *Two old cases reviewed*, n.23, p.59.

29. Dailey, n.22, p.10. Writing in 1929 another reviewer contended that Mollie's case 'was [in its time] one of the most valuable psychological mines in existence . . . [and, that if some reputable physician or psychologist had only taken notice of it] he might have rendered a report more epochal and startling in its revelations than Dr. Morton Prince's Beauchamp case,' see *Two old cases reviewed*, n.23, p.95.

30. Dailey, n.22, pp.11 and 140.

31. *Ibid.*, p.11.

32. *Ibid.*, also see *Two old cases reviewed*, n.23, p.59.

33. According to Shyrock, n.16, p.120, the tendency to sentimentalize illness during the Victorian era was applicable only to those diseases which lent themselves to the process. 'Violent and repulsive entities like smallpox or cholera were not amenable, but any disease which permitted onlookers to linger over the victim without shock or injury was appropriate for the purpose.' Mollie's temperamental delicate state, of course, was made to order. It is curious, too,

that Mollie was thought to have consumption, i.e., pulmonary tuberculosis, and this is the exact disease Shyrock indicated as being 'made to order in this connection' (Dailey, n.22, p.16, and Shyrock, *Ibid.*). As Veith has indicated, furthermore, 'In the nineteenth century, especially young women and girls were expected to be delicate and vulnerable both physically and emotionally, and this image was reflected in their [pre]disposition to hysteria and the nature of its symptoms. The delicacy was enhanced by their illness and as a result, the incidence of overt manifestations [of hysterical neuroses] was further increased' (I. Veith, *Hysteria: The history of a disease* [Chicago, 1970], p.209). It should be pointed out, however, that not all hysterical young girls developed such extreme symptoms as did Mollie (see text *infra*).

34. Veith, *Ibid.*, p.118. According to Veith horseback riding was specifically prescribed since it was 'the most acceptable exercise for gentlewomen . . . [since] they were the ones suffering most frequently from amenorrhea and hysteria' [and it therefore] became a therapeutic measure, and for centuries afterward [i.e., from the 16th century onward], hysterical patients were sent into the woods on horseback.'

35. Dailey, n.22, p.15.

36. Miss Susan E. Crosby quoted by Dailey, *Ibid.*, p.30.

37. Dailey, *Ibid.*, p.15.

38. Mr. John H. Taylor (of Boston?) 'a young gentleman of respectability and of good social standing' had asked Mollie, who was but sixteen years old at the time, to be his bride, Dailey, *Ibid.*, p.16.

39. It is very likely that Mollie's aunt, Miss Crosby, imbued feelings of guilt in Mollie regarding the planned marriage over-and-above Mollie's already very delicate emotional structure. Miss Crosby had been required to 'ask to be released from her [own second] promise of marriage' a year earlier in order to keep her promise to her sister to look after the life of her sensitive niece (Dailey, *Ibid.*, p.10—Miss Crosby's first lover died of yellow fever on his way to greet her). Dailey suggests that she did this without a 'murmur of complaint' but it is very easy to imagine that she would not look favorably upon her niece's marriage after she herself had been required to abandon a second, and what could have conceivably been to her mind the proverbial last chance at marriage. In any event, Mollie's second accident resolved this hypothesized problem and the long-suffering and 'self-abnegating' Miss Crosby and Mollie remained together for many years thereafter (see text *infra*, and Dailey, *Ibid.*, pp.7-9).

40. Dailey, n.22, p.17.

41. *Ibid.*, p.16.

42. See n.33.

43. *Two old cases reviewed*, n.23, pp.59-60; cf. with Miss Crosby's records in Dailey, n.22, pp.29 ff. and Mollie's own recollections, e.g., p.25, in *Ibid.*

44. Dailey, n.22, p.20, quoting Mollie.

45. Discussed in Veith, n.33, p.233.

46. Prince, n.1, 'Hysteria', 1906, pp.170-171. On anorexia nervosa see H. Bruch, *Eating disorders: Obesity, anorexia nervosa, and the person within* (New York, 1973), pp.211-305 (especially pp.238-244); and L.C. Kolb, *Modern clinical psychiatry*, 8th ed. (Philadelphia, 1973), pp.465-468. J.E. Wallace Wallin comments briefly on photophobia and its relation to hysteria and hyperaesthesia in *Clinical and abnormal psychology; A textbook for educators, psychologists and mental hygiene workers* (New York, 1927), p.302.

47. L. Linn, 'Clinical manifestations of psychiatric disorders,' in A.M. Freedman, H.I. Kaplan and H.S. Kaplan, eds., *Comprehensive textbook of psychiatry* (Baltimore, 1967), pp.546-577 (568).

48. The medical approaches that were employed in an attempt to control Mollie's condition are interesting. Not having the insight into the psychological nature of her condition, or having that insight, not having the psychotherapeutic or medicinal armaments to draw on, her physicians had to resort to their then-current medical methods of treatment and this included the individual and combined armaments of homeopathy, hydropathy, (or, the water-cure) and allopathy. For example, in one hydropathic method of treatment she was seated in a hot tub of water and ice water was thrown over her head. Another treatment had her rolled up in wet sheets which had been wrung out after being doused with ice water.

49. We are told in Dailey's biography in several places that Mollie took very little nourishment since it was impossible for her to keep things in her stomach and in fact it remained completely empty and caved in for some time, so much so that it was said that you could feel her spine by placing your hand in the cavity (Dailey, n.22, p.173). So limited was her ingestion of food, for example, that after a period of seven weeks without food on one occasion the only nourishment that she took then was one teaspoonful of punch and a small piece of cracker (Dailey, n.22, p.35). In addition, it was reported that from 1865-1878 'She . . . [ate] altogether . . . not so much food in the aggregate as an ordinary girl her age would eat in forty-eight hours' (in Dailey, p.187). Ultimately Mollie's 'lockjaw' required that she receive her nourishment by taking beef tea, brandy, or milk punch enemas or Sitz baths or having bags of 'Peruvian bark' (*cinchona*) dipped in brandy placed on her chest (Dailey, *Ibid.*, pp.25 and 27).

50. In Dailey, n.22, p.47.
51. These phenomena are discussed in a variety of places in the Dailey biography, in *Two old cases reviewed*, and in T.E. Allan, 'The clairvoyance of Mollie Fancher,' *The Arena* [1896], 12, 329-336 and are the very phenomena which evoked the most controversy prompting in the process an ultimate ignoring of her case.
52. Mollie herself, however, set the date of 7 February 1866, in Dailey, n.22, pp.19-20. In any case, her first trance was sometime in February of that year.
53. Dailey observed that 'the joints of her limbs . . . [were] apparently drawn asunder, leaving space in the joints into which a finger . . . could be easily pressed, showing the bones to be separated. The ankle joint . . . [was] drawn apart, and the small bones of the foot seem[ed] to be separated . . . The sole of the foot . . . [was] turned upwards in such a manner as to show a disjuncting of the ankle; and I . . . [was] assured, [he continued], that the heads of the thighbones . . . [were] apparently drawn from their sockets, and imbedded in her groin. Her lower limbs . . . [were] drawn somewhat upwards, and the cords under her knees . . . [were] hard and seemingly as unyielding as steel. All of these conditions have been produced by spasmodic action' (Dailey, n.22, pp.57-58).
54. In 1868 subsequent to being given some chloroform Mollie went into a state of ecstasy, we are told, during which she experienced the delusion and/or hallucinatory experience that she was with her mother in heaven. Her voice returned at that point, in addition to a relaxation of the eyelids which had theretofore been 'permanently' closed.
55. Her choice of colors for the worsted and for the flowers was always accurate, according to reports, and lended support in regard to her supposed 'second sight,' see Dailey, p.174. All of the objects prepared by her became prized treasures and were, for the most part, distributed to her friends—although in 1878 there was also an exhibition of her work in Buffalo, N.Y. (Dailey, n.22, p.169).
56. Miss Crosby described some of Mollie's 'feats' as follows: 'She could tell the exact time by simply passing her hand over the crystal of the watch; also tell the exact time across the room; she could tell the approach of a thunder storm some hours before it came; she could also tell the fire bells were going to ring sometimes as much as five minutes before they really did ring. She has very often told what parties are doing over in New York, and even further away [from her home in Brooklyn], and has always been correct in her statements,' in Dailey, n.22, pp.47-48.
57. I used the word 'alleged' in regard to Mollie's extrasensory feats for two reasons here. In the first place, Mollie's 'feats' so-called in this realm evoked controversy even at the time she was alive (n.51) and this issue regarding her talents must remain open. The well-known neurologist William A. Hammond (1828-1900), author of the first textbook on nervous diseases published in the United States (1871) and one of the founders of the American Neurological Association (F.R. Packard, *History of medicine in the United States*, 2 vols. [New York, 1932], 2, 1186, 1188 and *passim*), for example, was convinced that Mollie's condition was 'simulative hysteria' and that was that (quoted in Dailey, n.22, p.147 from an interview of Dr. Hammond published in *The [New York City] Sun* on 25 November 1878 [not viewed]).
58. In Dailey, n.22, p.66.
59. In Dailey, *Ibid.*, pp.112-113 and *passim*, and in *Two old cases reviewed*, n.23, pp.61-63.
60. Although Dailey does not discuss Mollie's 'isolated X-personality' as a reality, he intimates the possibility of its presence, p.92.
61. *Two old cases reviewed*, n.23, p.66.
62. Dailey, n.22, p.74.
63. *Ibid.*, p.71.
64. Dailey, n.18, p.82.
65. Dailey's recording of these first appearances is very ambiguous. The anonymous author of *Two old cases reviewed*, n.23, has attempted to clarify this and I follow his outline.
66. *Two old cases reviewed*, *Ibid.*, p.67.
67. It should be pointed out that some of these personalities disappeared for a time subsequent to the late 1870's only to reappear as the result of another 'nervous shock' in 1886 when Mollie had two falls from her bed, see Dailey, n.22, quoting Mollie, pp.70 and *passim*, and *Two old cases reviewed*, n.23, p.68. All in all, however, the exact dates of their appearance and/or temporary disappearance is very ambiguous in Dailey and internally inconsistent.
68. In Dailey, n.22, p.71.
69. *Ibid.*, pp.86-87.
70. Dailey, n.22, pp.146-149 (146-147).
71. *Ibid.*, p.148.
72. See n.51.
73. Discussed in Dailey, n.22, pp.150-167 in the context of a rebuttal by Mr. Epes Sargent, 'a man of great literary attainment, a careful student of psychology, a well-known writer' (p.149). Also see *Dictionary of American biography* (New York, 1963), S.v. Epes Sargent; q.v. G.M. Beard, 'The scientific lessons of the Mollie Fancher case,' *Med. rec.* [New York], 1878, 14, 446-448.
74. Beard, *Ibid.*, p.446.
75. *Ibid.*
76. *Ibid.*, p.447.
77. *Ibid.*, p.448. Beard was also of the opinion, however, that Charcot's work was a 'grotesque performance' and that his research had resulted in 'false conclusions . . . so numerous that they crowd each other, and completely block the pathway to the truth,' pp.446-447.
78. 'Mr. Epes Sargent to the *New York Sun*,' signed 'Boston, December 17, 1878' and reproduced in Dailey, n.22, pp.150-167. Mr. Sargent is one of the few defenders of Mollie who did not know her personally.
79. In Dailey, *Ibid.* (pp.169-175), reproducing West's letter published by the *Buffalo Courier* (New York) on 10 November 1878.
80. In Dailey, *Ibid.*, pp.176-180 (180). Parkhurst had published his conclusion in the *New York Herald*, 30 November 1878. Parkhurst achieved renown for his research on 'stellar photometry' and was also a Fellow of the American Association for the Advancement of Science. Charles Edwin West (b. 1809) does not appear to have been the type to be fooled by an hysterical girl's deception either. He was a member of the Alpha Chapter of Phi Beta Kappa at Union College in 1831, received an honorary M.D. degree from the University of New York, that of M.A. by Columbia, LL.D. by Rutgers, and 'in 1890 the State University of New York created a doctorate of Pedagogy for the sole purpose of conferring it upon Dr. West.' He was elected to over twenty-five learned societies and was said to have educated over 15,000 young women, see *The national cyclopaedia of American biography* (New York, 1898), S.v. Charles Edwin West. There were other supporters of Mollie; however, space limitations will not allow mention of them here.
81. Q.v. *The national cyclopaedia of American biography* (New York, 1937), S.v. Abram Hoagland Dailey (1831-1907). Dailey is said to have written a number of essays on the relation of hypnotism to medical jurisprudence and to have been interested in spiritualism.
82. H.W. Ruoff, *Masters of achievement: The world's greatest leaders in literature, art, religion, philosophy, science, politics and industry* (Buffalo, New York, 1911), p.634, and Dailey, n.22, p.256. Coues was President of the 'Psychical Congress.'
83. Dailey, *Ibid.*
84. *Ibid.*, p.257. I have not seen the original article. Dailey was President of the Medico-Legal Society at one time, but perhaps not in 1894, see n.81.
85. In *Ibid.*, p.259.
86. *Ibid.*, p.261.
87. *Ibid.*, pp.112, 170, 260 and *passim*.
88. Packard, n.57, 1, 448 and 2, 1098.
89. Dailey quoting West, n.22, p.205. West reverses the order of their deaths in his statement. Additionally, West only implies that Agassiz was to come to New York, he straightforwardly states that Wyman definitely was coming.
90. *Ibid.*, p.260.
91. This writer plans to continue his investigation of this case and perhaps report further on it in some future publication. These additional investigations may include a re-examination of the scientific evidence of the Mollie Fancher case, as interpretation of the facts of her life in the light of our modern understanding of this condition, and an examination of the import of this case in relation to the social, scientific, and cultural milieu in which it occurred. These communications will necessitate the acquisition of additional material related to all of the events in question.
92. Beginning on 4 February 1915 the *New York Times* included several short articles on Mollie, announcing first that she was beginning her fiftieth year in bed (*New York Times*, 4 February 1915, p.7, col.3), then that she was planning for her 'Golden Jubilee' celebration to be held in 1916 (*New York Times*, 13 November 1915, p.11, col.2), her invitation to President Wilson to attend the celebration was reported next (*New York Times*, January 26, 1916, p.7, col.2), and finally a report was made on the 'Jubilee' itself during which three-hundred people had strewn over the 'sick chamber' in 'reckless profusion,' flowers and gifts (*New York Times*, 4 February 1916, p.9, col.5). President Wilson was unable to attend, but sent Mollie a letter of regrets for his 'enforced absence.'
93. *New York Times*, 12 February 1916, p.11, col.5.
94. *New York Times*, 12 February 1916, p.11, col.5; and *Ibid.*, 15 February 1916, p.11, col.4. Mollie is buried in 'Lot 8933, Sec. 33 and 34.'





*Mollie Fancher as she appeared during the first
nine years of her illness or 'long trance' so-called.*